



## **Supplemental Application Data Sheet**

### **Application Information**

Application Type::	371
Subject Matter::	Utility
Title Line One::	METHOD AND APPARATUS
Title Line Two::	FOR COATING A CARRIER
Attorney Docket Number::	UMICORE 0150-PCTUS
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	2
Total Drawing Sheets::	2
Small Entity?::	No

### **Applicant Information**

Applicant Authority type::	Inventor
Primary Citizenship Country::	DE
Status::	Full Capacity
Given Name::	Michael
Middle Name::	
Family Name::	HARRIS
City of Residence::	Summerstrand
Country of Residence::	SA
Street of mailing address Line 1::	31 Bradley Road
City of mailing address::	Summerstrand
Postal or Zip Code of mailing address::	6007 Port Elizabeth
Country of mailing address::	SA

Applicant Authority type:: Inventor  
Primary Citizenship Country:: DE  
Status:: Full Capacity  
Given Name:: Dieter  
Middle Name::  
Family Name:: DETTERBECK  
City of Residence:: Linsengericht  
Country of Residence:: DE  
Street of mailing address Line 1:: Vor der AU 42  
City of mailing address:: Linsengericht  
Postal or Zip Code of mailing address:: 637589  
Country of mailing address:: DE

Applicant Authority type:: Inventor  
Primary Citizenship Country:: BE  
Status:: Full Capacity  
Given Name:: Egbert  
Middle Name::  
Family Name:: LOX  
City of Residence:: Hochwaldhausen  
Country of Residence:: DE  
Street of mailing address Line 1:: Am Lärchentor 8  
City of mailing address:: Hochwaldhausen  
Postal or Zip Code of mailing address:: 36355  
Country of mailing address:: DE

Applicant Authority type:: Inventor  
Primary Citizenship Country:: DE  
Status:: Full Capacity  
Given Name:: Thomas  
Middle Name::  
Family Name:: KREUZER  
City of Residence:: Karben  
Country of Residence:: DE  
Street of mailing address Line 1:: Philipp-Reis-Strasse 13  
City of mailing address:: Karben  
Postal or Zip Code of mailing address:: 61184  
Country of mailing address:: DE

#### **Correspondence Information**

Correspondence Customer Number:: 23719

#### **Representative Information**

Representative Customer Number::	23719
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#### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
DE	103 17 885.6	17-April-2003	YES

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/EP2004/ 004074	16 April 2004

**Assignee Information**

Assignee name:: UMICORE AG & CO. KG  
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Postal or Zip Code of mailing address:: 63457 Hanau-Wolfgang  
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